

Name of Event: Independent Aging Agenda Event, The 2005 White House Conference ON Aging, "It Matters to LGBT Elders," A Public Forum-

Date of Event: Friday, September 30, 2005

Location of Event: Lakeside Park, Oakland, California

Number of Persons Attending: Total 45, 18 under age 60

Sponsoring Organizations: City of Oakland Department of Human Services, San Francisco Department of Adult and Aging Services, San Francisco LGBT Neighborhood Community Care, Lavender Seniors of the East Bay, Spectrum Senior Services, Marin County, New Leaf Outreach to Elders, San Francisco, Openhouse, San Francisco, Progressive Research and Training In Action, Oakland, Family Caregivers Alliance, American Society On Aging/Lesbian and Gay Aging Information Network, San Francisco The National Gay & Lesbian Task Force, Washington D.C., and the LGBT Elder Law Project, National Center for Lesbian Rights, Headquarters, San Francisco

Contact Person: Joyce Pierson, LGBT Elder Law Project, National Center for Lesbian Rights

Telephone Number: 415-392-6257, ext.312 Email: pierson@nclrights.org

Priority Issue #1: .

Economic Security/ Access and Fairness

Economic security and opportunities for access and fairness under the law for pensions, public benefits and employment opportunities is the number one priority for LGBT persons age 50 and older as adequate income is the basic foundation for survival for all aging persons.

Barriers:

1. Lack of legal protections, federal and state jurisdictions.

Because of widespread stigma and homophobic attitudes within American society towards all persons whose sexual orientation is not heterosexual, there is a wide disparity of civil rights and protections under federal and state jurisdictions; there are no protections under federal law; state jurisdictions vary from state to state; even states with recognition of same-sex relationship are not recognized by federal jurisdiction. Massachusetts is the only state permitting same-sex marriage; California's Domestic Partnership Law permits many of the same rights as married heterosexual couples; and states who have civil unions and/or forms of domestic partnership. The laws governing national public benefits system are based on traditional marriage laws which preclude eligibility for non-married couples living together, both same-sex and heterosexual. There are nearly 1400 rights and benefits under federal law for married couples, in California there are some 500 state rights and benefits for married couples. Social Security Retirement, Disability, SSI, Medi-Caid, are all predicated on heterosexual marriage even though the vast majority of the LGBT population have contributed taxes during all of their working years. Full citizenship does not extend to LGBT elders, therefore causing severe hardship and unequal treatment for economic security. Private sector benefits and pensions again are based on the federal DOMA law which precludes economic security.

2. LGBT elders have great concerns about the future of Social Security as many retired persons' primary retirement is based on SSA.

3. Obtaining employment after age 50 is a critical concern.

4. Homophobia in the workforce continues to affect all LGBT persons of all ages.

5. Baby boomers carry deep fears regarding national public policy and proposed reforms.

6. Tax requirements for retired persons are Social Security cause hardships for low to moderate income.

7. High percentage of poverty among LGBT elders, especially women living alone.

Proposed Solutions:

1. Amend the Older Americans Act to include specific language for lesbian, bisexual, gay, transgender elders as a protected constituency for all services for quality of life, independent living, overcoming isolation based on stigma and homophobic discrimination for all persons regardless of race, ethnicity, religion or gender.
2. Legislative investigation into reforms needed at the federal level to undo the injustice and inequality in public benefits based on marriage impacting millions of older Americans.
3. Legislative action to amend provisions in the Older Americans Act for expanded senior employment opportunities.
4. Employment training for older workers, especially persons forced out because of ageist and or homophobic discrimination practices.
5. Protect Social Security and MediCare.
6. Promote non-partisan reforms and policy recommendations.
7. Recommend more realistic poverty level/eligibility requirements for SSI/MediCaid.
8. Promote elimination of employment discrimination towards LGBT persons.

Priority #2: Quality Health Care and Long Term Care:

Access for affordable, quality health and long term care rates as a priority of equal importance as economic security, impacting all elders in because of increased longevity, consumer expectations, modern medical breakthroughs, and many other related factors overlapping with all of the annotated aging agenda items identified by the WHCoA Policy Committee. Research shows that physiological aging and health care/long term needs experienced by LGBT elders are much the same as the aging profiles of all aging persons except for access and fairness and safety seeking available or existing community health and social services. Again, stigma and homophobic practices prohibit LGBT persons receiving equity in service delivery.

Barriers:

1. Major lack of sensitivity and cultural competency in mainstream providers of health and long term care settings, assisted living, nursing homes, and retirement living facilities, including in-home caregivers.
2. Most elders express the desire to remain in their own environment/home for as long as possible, requiring improved community support services.
3. A largely two-tier medical system controls quality of care; Medi-Care and Medi-Cal requirements do not provide adequate health care for LGBT elders, especially individuals who are members of non-white ethnicity; lack of insurance or supplemental plans; no Medi-Care for elders who do not qualify for Social Security Retirement.
4. LGBT elders for the most part, live very closeted lives; are afraid to disclose their sexual orientation or partner relationship for fear of rejection or discrimination.
5. Lack of legal protections results in lack of hospital visitation by a loved one/partner; lack of safeguards provided to married partners.
6. Extreme isolation in institutional settings: retirement homes, nursing homes, life care living; isolation caused by stigma, homophobic practices; isolation of LGBT persons among one another because of fear of being found out and ostracized by other residents. This isolation often results in accelerated rates of physical and emotional downward spirals.
7. Lack of awareness for safety needs of LGBT residents.
8. Untreated depression leading to more severe forms of clinical depression.
9. Lack of mental health services for LGBT elders.

Proposed Solutions:

1. Promote universal health care at the national level.

2. Amend the Older Americans Act to specific language for lesbian, bisexual, gay, transgender elders as a protect elder constituency for quality of life health care and long term care services. Increase funding levels for in-home support services . Establish new cultural competency requirements for contracted Title III Nutrition and Social Services for LGBT elders including ethnic minority cultural competencies. Promote non-discrimination practices in senior centers regarding LGBT elders, i.e., mandate sensitivity training respecting LGBT elders; promote and coordinate trainings for all health care, social workers, nurses, aides, in-home caregivers and other staff at hospitals, medical centers, senior health clinics and long term care institutions, assisted living centers, board and care, nursing homes, retirement centers, ombudsman programs, and contract managers in health care services.
4. Promote education and training for doctors in LGBT cultural competency.
5. Development and enforcement of laws to protect LGBT elders in long term care settings.
6. Develop programs to address Post Traumatic Stress Syndrome for survivors of HIV related illness or lifelong traumas caused by homophobic discrimination/depression, clinical depression in old age.

Priority #3.

Affordable Housing and Safety Issues:

In general elders across the nation lack affordable, appropriate housing choices as they age. Housing stock has suffered a lack of government backing since the early 1980's when federal policies shifted from subsidized housing development; diminished growth in HUD projects, Section 8 to name a few at the very time, the population growth of elders has steadily increased. The changing demographics and longevity of elders has also impacted the challenges facing the housing industry and developers. There is not one approach or solution available to meet all the complex needs of housing elders; how to create desirable, affordable housing, securing funding, private or public, land and environmental needs, etc. LGBT elders in particular face few choices in senior housing options.

Barriers:

1. Lack of federal and state non-discrimination housing laws.
2. Lack of affordable retirement housing for elders.
3. Lack of access and fairness in senior housing choices based on stigman and discriminatory practices, fear of being ostracized by fellow residents.
4. Lack of safety and protection for LGBT residents.
5. Incentives need for developers to build better and more senior housing.
6. Lack of federal subsidies for public, non-discriminatory senior housing.
7. Increased incidence of homeless LGBT elders living in Bay Area.

Proposed Solutions:

1. Promote more private/public incentives for senior housing options.
2. Develop sophisticated approaches for alternative housing solutions for all seniors.
3. Legislative action covering fair housing non-discrimination for elders, including LGBT elders.
4. Develop staff and resident sensitivity trainings in senior housing for LGBT elders.
5. Broaden the definitions of senior housing.
6. Promote investment in existing housing stock rentals: housing rental units for self-defined family or couples wanting to live together.
7. Amend Older Americans Act to establish a new, revised approach to senior housing, looking beyond the large apartment complexes to alternative forms in other nations, i.e., small homes or units attached to congregate rooms for activities; attached studios, etc. for non-traditional family constellations.
8. More funding to create senior housing for LGBT elders.

Resolution Number 1:

Be it hereby resolved that the LGBT elders and persons, age 45 to 59, attending the official designated Independent Aging Agenda Event, LGBT Public Forum on September 30, 2005 in Oakland, California, unanimously adopted the recommendation to the Delegates of the 2005 White House Conference On Aging that the Older Americans Act of 1965, be further amended to include access and fairness on behalf of older Americans who self-identify as lesbian, gay, bisexual, transgender, age 60 and over, to all the services and benefits of the community-based senior services set forth in the Act, and that the Act include the recognition and acceptance of LGBT elders as a significant underserved elder population in the United States.

Resolution Number 2.

Be it hereby resolved that the LGBT elders and persons age 45 to 59, attending the official designated Independent Aging Agenda Event, LGBT Public Forum on September 30, 2005 unanimously adopted the recommendation of the proposed Recommendations of the Lesbian and Gay Aging Information Networking (LGAIN) to the White House Conference On Aging as set forth:

- 1) Ensuring Access to Aging Services for LGBT Elders
- 2) Developing Healthcare Preventions and Education Policies
- 3) Addressing Homophobia and Eliminating the Presumption of Heterosexuality Among Service Providers and Researchers
- 4) Eliminating the Legal and Social Barriers Facing Caregivers and Survivors
- 5) Ensuring Fair Housing Practices and Removing Barriers to Development of Sensitive Housing Alternatives.